

Abercorn Nursing Home Care Home Service

11 Abercorn Terrace
Edinburgh
EH15 2DE

Telephone: 0131 669 3789

Type of inspection: Unannounced
Inspection completed on: 8 February 2017

Service provided by:
Abercorn Care Ltd

Service provider number:
SP2003002437

Care service number:
CS2003010607

About the service

Abercorn Nursing Home is a care home service, registered to provide 24 hour care to a maximum of 22 older people. It is situated in a residential area of Portobello to the east of the city of Edinburgh and is close to shops, Portobello Promenade and beach, bus routes and other local/ community services.

The care home is a stone built, detached property, with parking and a garden to the front of the house. There is an enclosed garden at the rear of the building. Next door to Abercorn Nursing Home is another care home owned and operated by the same provider (Abercorn Care Ltd).

The rear gardens of both of these homes are connected by a small gate and path. This gives the residents an opportunity to use both gardens and enables them to meet and mix with their neighbours.

Accommodation is provided on two floors, with stairs and a passenger lift giving access to the upper floor. There are 12 single and five twin bedrooms, 13 bedrooms have en suite wash hand basin and toilet facilities. The home has two shower rooms and one bathroom with multi-function bath facility. Two sitting rooms and a dining room are on the ground floor.

The service's website notes that it aims to set "small achievable goals on an upward spiral toward excellence". The Philosophy of Care states that:

"Each resident will be treated as an individual taking into account their physical, emotional and spiritual needs. The resident's right to privacy, dignity and confidentiality will be respected. The full involvement of the resident in determining their care will be undertaken. "

What people told us

Discussions with residents and the outcomes of pre inspection questionnaires returned by residents and relatives/carers and staff informed our inspection.

We met most of the residents during our inspection to gain their views on the overall service they received in Abercorn Nursing Home. We respected the privacy of those who did not wish to speak with us.

Some of the comments made by residents and relatives/carers were as follows:

"Abercorn appears to have well qualified staff. Each shift is well staffed and the staff turnover appears to be very low."

"I genuinely believe my mother is well cared for. She has real challenges in communicating and has very limited capabilities but staff are very attentive to her needs."

"My husband and myself are happy with the quality of care in Abercorn Nursing Home."

"My relative has been in this home for some years, and, as a family we are still very happy with the quality of care. Our relative at times can be challenging but all staff know how to manage this behaviour and this is a great comfort to us."

"I was very impressed by how much staff respect my relatives need for calmness and privacy, bending over

backwards to make him comfortable and welcome. I am very pleased to be invited to relatives, meetings where relatives are warmly encouraged to give ideas and feedback."

"Previously we were unhappy at time taken to respond to requests for help and felt the attitude of some staff was poor. With new management the general atmosphere, standard of care and attitude of staff is much improved. The new manager has improved the home across the board and is sympathetic, approachable and in control. The dining area is functional and should be made more like at home."

"Everyone is very friendly, I enjoy the company and staff are nice. At night when I buzz for assistance they are prompt to attend and there are only two staff. Domestic staff are very good and keep the place clean, laundry staff also very good".

Self assessment

We received a fully completed self assessment document from the manager. Under each statement the manager noted strengths of the service and areas which could be improved or developed further.

The grades awarded through self assessment for each quality theme and statement were all 6 - excellent while the grades awarded through inspection for each quality theme were 5 - very good.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	5 - Very Good

Quality of care and support

Findings from the inspection

We saw a respectful and courteous approach to resident care and very high standards of personal care and support were evident. Staff were organised in their duties and any resident requests for assistance were attended to promptly and with discretion.

Resident and relatives told us that there had been improvements in the quality of care provided over the last year.

Individual care plans were well set out and although each followed the same format information was person centred. Care plans took account of assessed needs and personal preferences in how care was to be provided and were informed by risk assessments. For example:

- Management of falls.
- Moving and handling.
- Risk of malnutrition.
- Risks of pressure ulcer development.

These assist staff to identify and manage any perceived risks in these areas of care.

No one had a wound as a result of pressure damage and care plans included any risks and preventative measure in place. However, the manager was looking at developing a record and overview of this information for ease of reference and auditing.

Improvements had been made to the wound care management and recording since our last inspection.

Evaluations of the content of plans and risk assessments contributed to care plan reviews which took place at least once in a six month period and gave the resident and/or their representative the opportunity to discuss and agree the care to be provided.

Information in care plans also showed that staff liaised with health care professionals where indicated, for example GP's and dietitians to ensure residents' healthcare needs were assessed and managed.

Samples of the care plans and records we looked at were up to date.

The manager had an overview of residents' legal status which helped to ensure that residents' legal rights were protected.

Specific dietary needs were catered for and drinks, snacks, fruit and home baking were available each day. Meal times were well organised and residents who needed more assistance to eat and drink received this promptly.

A variety of activities were planned for residents to join in as they wished. However, residents told us that their preference for quiet time and privacy was also respected.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of environment

Findings from the inspection

Abercorn Nursing Home was comfortable, clean and well maintained throughout. Residents and relatives/carers also confirmed these findings.

Bedrooms had been personalised, decorated and furnished to suit the preferences of the resident/s. Bed linen and towels were fresh and clean and there were ample stocks of these.

Systems were in place to report any repair and maintenance needs and routine and safety checks were undertaken to ensure the safety of the environment and equipment in use. All equipment and installations we saw were clean and in working order.

However, some flooring in bathroom/toilets was beginning to show wear and tear and will soon need attention. The manager will follow this up.

Housekeeping staff told us they had enough equipment and cleaning materials to maintain home and to minimise any potential spread of infection.

Gas safety checks were within date and safety checks of electrical appliances were being undertaken at the time of our inspection.

Specialist equipment: baths, hoists and slings were checked in line with LOLER requirements. (Lifting Operations and Lifting Equipment Regulations 1998). These checks were due to take place again during this month.

Monthly assessment of each resident's needs informed the staffing provided and the deployment of staff throughout the home. Sample of assessments and duty rotas confirmed that the number of care hours provided met or exceeded the care hours assessed as necessary.

Medication management systems were well organised. Audits and advice from the dispensing pharmacist also assisted staff to manage medicines in accordance with best practice guidance.

Accidents and incidents were recorded and evaluated to inform any preventative actions needed and to inform any changes needed to care plans.

Health and safety policies and procedures and staff training assisted staff to promote a safe and comfortable environment. These included:

- Fire safety.
- Control of substances hazardous to health (COSHH).
- Moving and handling.
- Food hygiene.
- Management of stress and distress.
- Adult support and protection.
- Management of dementia.

Overall, the routine checks, audits, staffing and staff training arrangements helped to promote a comfortable and safe environment for residents.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

We did not look at all aspects of this quality theme but noted progress with areas for development we outlined at the last inspection about safe recruitment, staff training and staff practice.

Improvements had been made to the safe recruitment practices in the home since the last inspection. A checklist was used to monitor the request and receipt of information including references and PVG check (Protection of Vulnerable Groups).

This gave an overview of the progress of the application. The information also noted induction and training needed and undertaken. The sample of staff recruitment files we looked at had been fully completed.

Records were kept of staff registration with regulatory bodies such as NMC (Nursing and Midwifery Council) and SSSC (Scottish Social Services Council). These showed that staff who required to be registered and registrations were up to date.

We saw a professional, trained and motivated staff team and staff practice during our inspection and staff confirmed that they received enough training to assist them in their duties in the home.

Arrangements were in place for induction and refresher training to help staff keep up to date with good practice and to promote professional and safe practice.

In pre inspection questionnaires staff also commented positively about the training and support and guidance they received while working in this service. However, in two of twelve pre inspection questionnaires returned staff indicated that they did not always feel safe at work and didn't know if they had any training needs which were not being met in the service.

There were no contact details to help us follow this up with staff. Therefore, we shared the outcome of questionnaires with the manager in order that these issues may be further explored through staff meetings and, or, supervision.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

We did not look at all aspects of this quality theme but noted progress with the development and implementation of quality assurance, audit systems and action plans for improvements in the service.

Requirements and recommendations we made at the last inspection in March 2016 had been implemented in the service.

The manager maintained an "occurrence log" which was an audit system to show quality assurance measures and any progress with actions and outcomes as a result of these.

These included:

- Care planning and reviews.
- Monitoring risks, for example in relation to falls, pressure area care and nutrition.
- Management of accidents and incidents.
- Cleaning and maintenance.
- Management of medicines.

The consistent use of action plans helped to show progress with any actions identified through these audits. These should continue to be developed and implemented to help evidence the continuing improvement of the service.

In accordance with the Certificate of Registration, the manager was supernumerary to the staffing rota. This may assist the manager to be available to residents, relative/carers and staff to gain their views, observe practice and to progress development of the service.

We received very positive comments about the improvements in management and leadership in the home since the last inspection some of which we have reported under " What people told us".

Staff told us that they felt supported in the work they did in the home and all were enthusiastic and spoke of being motivated to provide good standards of care to residents.

This may also have contributed to the very high levels of satisfaction expressed to us about all aspects of the service during the inspection and in pre inspection questionnaires by residents and relatives/carers.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider must ensure that procedures are put in place to minimise the service users' risk of pressure ulcer development and ensure that appropriate preventative measures are implemented and are clearly documented in care plans.

This requirement was made on 24 March 2016.

Action taken on previous requirement

Care plans included risk assessment relating to risks of pressure ulcer development and any aids and adaptation in use to relieve and or minimise any pressure damage. No one had any wounds relating to pressure damage at the time of our inspection.

Met - within timescales

Requirement 2

The provider must ensure that medications are managed in a manner that protects the health and welfare of service users. In order to achieve this, the provider must:

- a) Ensure that staff implement best practice in relation to medication management.
- b) Where medications are prescribed, records must clearly evidence when medication is not given/omitted that this is documented with explanation.
- c) Where medications are used for stress and distress, guidance must be available to staff on appropriate actions to take before administration.
- d) Staff must follow instructions from other healthcare professionals when administering medications. Where instructions are unclear staff must seek clarification and advice.

This requirement was made on 24 March 2016.

Action taken on previous requirement

We noted improvements in the management of medicines in the home and all records had been properly completed. There were no medicines currently in use for the management of stress and distress although other "as required" medicines included full instruction for use.

Met - within timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

After each residents' forum meeting, an action plan should be developed that describes the decisions made and actions to be taken to carry out decisions or suggestions. The action plan should be reviewed at the next meeting so that residents can be given information relating to the actions taken and progress made.

This recommendation was made on 24 March 2016.

Action taken on previous recommendation

We saw that action plans were used to progress actions needed arising from meetings. These records included when actions had been completed. This recommendation had been implemented.

Recommendation 2

The service should develop the system of personal plans to include regular evaluation of all aspects of care. Evaluations should be person centred and consider if planned care is meeting residents' care and support needs.

This recommendation was made on 24 March 2016.

Action taken on previous recommendation

There were regular audits, evaluations and reviews of care plans which took account of personal outcomes and any changes necessary to ensure the residents' care needs were being met. This recommendation had been implemented.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
24 Mar 2016	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
9 Oct 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 5 - Very good
16 Oct 2013	Unannounced	Care and support 5 - Very good Environment 4 - Good Staffing 5 - Very good Management and leadership 5 - Very good
25 Oct 2012	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 6 - Excellent Management and leadership 6 - Excellent
14 Dec 2011	Unannounced	Care and support 6 - Excellent Environment 6 - Excellent Staffing Not assessed Management and leadership Not assessed
9 Feb 2011	Unannounced	Care and support 6 - Excellent Environment Not assessed Staffing Not assessed Management and leadership Not assessed
14 Sep 2010	Announced	Care and support 6 - Excellent Environment 6 - Excellent Staffing Not assessed Management and leadership Not assessed
10 Mar 2010	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good

Date	Type	Gradings	
		Management and leadership	Not assessed
17 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
27 Nov 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
5 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good Not assessed Not assessed

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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